



Commonwealth
of Massachusetts

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates:

Beginning Date:

11/20/19

Ending Date:

10/28/19

Type of Report: (Check one)

☐ 8th day preceding preliminary

☒ 8th day preceding election

☐ 30 day after election

☐ year-end report

☐ dissolution

JOSEPH DENNIS GOULD

Candidate Full Name (if applicable)

SCHOOL COMMITTEE SAUGUS

Office Sought and District

6 SERINO WAY SAUGUS 01906

Residential Address

E-mail: JDGOULD1969@AOL.COM

Phone # (optional):

6172574847

Committee Name

Name of Committee Treasurer

Committee Mailing Address

E-mail:

Phone # (optional):

2019 OCT 28 A 11:32
TOWN CLERK'S OFFICE
TOWN OF SAUGUS, MASS.

RECEIVED

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report

0

Line 2: Total receipts this period (page 3, line 11)

0

Line 3: Subtotal (line 1 plus line 2)

0

Line 4: Total expenditures this period (page 5, line 14)

631.40

Line 5: Ending Balance (line 3 minus line 4)

631.40

Line 6: Total in-kind contributions this period (page 6)

0

Line 7: Total (all) outstanding liabilities (page 7)

0

Line 8: Name of bank(s) used:

Affidavit of Committee Treasurer:

I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including all contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury: _____ (Treasurer's signature)

Date:

FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 box only)

Candidate with Committee and no activity independent of the committee

☐ I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55. I have not received any contributions, incurred any liabilities nor made any expenditures on my behalf during this reporting period.

Candidate without Committee OR Candidate with independent activity filing separate report

☐ I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury:

John D. Gould

(Candidate's signature)

Date: 10/28/19

SCHEDULE A: RECEIPTS

M.G.L. c. 55 requires that the name and residential address be reported, in alphabetical order, for all receipts over \$50 in a calendar year. Committees must keep detailed accounts and records of all receipts, but need only itemize those receipts over \$50. In addition, the occupation and employer must be reported for all persons who contribute \$200 or more in a calendar year.

(A "Schedule A: Receipts" attachment is available to complete, print and attach to this report, if additional pages are required to report all receipts. Please include your committee name and a page number on each page.)

[illegible]

* If you have itemized receipts of \$50 and under, include them in line 9. Line 10 should include only those receipts not itemized above.

SCHEDULE B: EXPENDITURES (continued)[illegible]

* If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above.

SCHEDULE D: LIABILITIES

M.G.L. c. 55 requires committees to report ALL liabilities which have been reported previously and are still outstanding, as well as those liabilities incurred during this reporting period.

Date Incurred	To Whom Due	Address	Purpose	Amount
				0
			2019 OCT 28 A 11:32 TOWN CLERK'S OFFICE TOWN OF SAUGUS, MASS.	RECEIVED
Enter on page 1, line 7 →			Line 18: TOTAL OUTSTANDING LIABILITIES (ALL)	0

Company Name JD GOULD

To: 



Date

10.9.19

Po#

ALL CREDIT CARD PURCHASES
ARE SUBJECT TO A
4% PROCESSING FEE

SACHEM INVOICE Description of Work
SIGNworks

QTY. 20

Size Lgth 24" Hgt 15"

Font

Color RED, BLUE

781-941-8007

124 Main ST. SAUGUS, MA 01906

FAX :781-941-8009

Material CORO

50% deposit on all orders balance due upon completion of delivery.

All Price Quotes Good For 30 Days

Description

 JOSEPH "DENNIS"

GOULD

SCHOOL COMMITTEE

\$13.40EA = \$268.00
\$26.25

Bucket

Labor

In Shop Labor

Artwork

Materials \$

Install \$

Tax **\$18.40**

Total **\$312.65**

Deposit **Balance** **Signature**

SACHEM INVOICE Description of Work

SIGNworks

781-941-8007
124 Main ST. SAUGUS, MA 01906
FAX :781-941-8009

Company Name DENNIS GOULD

To:



QTY. 100

Size Lgth 4" Hgt 10.5"

Font

Color WHITE, BLUE ON RED

Date

9.26.19

Po#

ALL CREDIT CARD PURCHASES
ARE SUBJECT TO A
4% PROCESSING FEE

Material

BUMPER STICKERS

50% deposit on all orders balance due upon completion of delivery.

All Price Quotes Good For 30 Days

Description

GOULD

SCHOOL COMMITTEE

Bucket

Labor

In Shop Labor

Artwork

Materials \$

Install \$

Tax \$18.75

Total \$318.75

Deposit Balance Signature